

[USE FAX CERTIFICATE OR CERTIFICATE UNDER 1.8 AS APPROPRIATE]

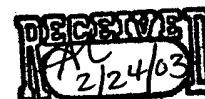
Certificate of Facsimile Transmission

I hereby certify that the attached RCE Transmittal to Examiner Andrew T. Caldwell of Group 2154, is being facsimile transmitted to the Patent and Trademark Office to Group 2154, facsimile no. (703) 746-7238) on the date shown below.

(Total pages transmitted is 3 -including this one).

Judy Wigmore
Judy Wigmore

Official



Date: February 24, 2003

PATENT APPLICATION
Attorney's Do. No. 2705-92

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of: Prasad Y. Chebrola

Serial No. 09/431,357

Examiner: Andrew T. Caldwell

Filed: November 1, 1999

Group Art Unit: 2154

For: LOW-IMPACT METHOD AND APPARATUS FOR MAINTAINING NETWORK
ACCESS SERVERS

02/27/2003 RBROWN1 00000001 09431357

01 FC:1801
02 FC:1253

750.00 DP
020.00 DP
REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Box RCE

Assistant Commissioner for Patents
Washington, D.C. 20231

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

1. Submission required under 37 C.F.R. § 1.114

a. ☐ Previously submitted:

☐ Consider the amendment(s) reply under 37 C.F.R. § 1.116 previously filed
on _____.

☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed
on _____.

☒ **Other: Preliminary Amendment to follow.**

b. ☐ Enclosed is:

☐ Amendment/Reply

- ☐ Affidavit(s)/Declaration(s)
- ☐ Information Disclosure Statement (IDS)
- ☒ Other: Preliminary Amendment and Declaration with attached Exhibit A.

2. Miscellaneous

- ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; fee under 37 C.F.R. § 1.17(i) required).

☐ Other:

3. Fees: (Note: The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed)

- ☒ RCE fee required under 37 C.F.R. § 1.17(e)

- ☐ \$375 small entity
- ☒ \$750 large entity

- ☐ Extension of time fee (37 C.F.R. §§1.136 and 1.17)

	small entity	large entity
<input type="checkbox"/> Extension of Time - 1 st	<input type="checkbox"/> \$55	<input type="checkbox"/> \$110
<input type="checkbox"/> Extension of Time - 2 nd	<input type="checkbox"/> \$205	<input type="checkbox"/> \$410
<input checked="" type="checkbox"/> Extension of Time - 3 rd	<input type="checkbox"/> \$465	<input checked="" type="checkbox"/> \$930

- ☐ Suspension of application fee (37 C.F.R. § 1.17(i))--\$130

- ☒ PTO Form 2038 authorizing credit card payment is attached.


- ☒ Any deficiency or overpayment should be charged or credited to deposit account number 13-1703. A duplicate copy of this sheet is enclosed.

**20575**

PATENT TRADEMARK OFFICE

Respectfully submitted,

MARGER JOHNSON & McCOLLOM, P.C.


James G. Stewart
Reg. No. 32,496

MARGER JOHNSON & McCOLLOM, P.C.
1030 SW Morrison Street
Portland, OR 97205
503-222-3613

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

United States Patent & Trademark Office
Credit Card Payment Form
Please Read Instructions before Completing this Form
Credit Card Information

Credit Card Type: Visa

Credit Card Account #: 4251 2460 0038 4922

Credit Card Expiration Date: January, 2004

Name as it Appears on Credit Card: James G. Stewart

Payment Amount: \$(US Dollars): \$1680

Signature: 

Date: February 24, 2003

Refund Policy: The Office may refund a fee paid by mistake or in excess of the required. A change of purpose after the payment of a fee will not entitle a party to a refund of such fee. The Office will not refund amounts of twenty-five dollars or less unless a refund is specifically requested, and will not notify the payor of such amounts (37 CFR 1.26). Refund of a fee paid by credit card will be via credit to the credit card account.

Service Charge: There is a 50.00 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21(m)).

Credit Card Billing Address

Street Address 1: MARGER JOHNSON & McCOLLOM, P.C.

Street Address 2: 1030 SW MORRISON STREET

City: PORTLAND

State: OREGON

Zip/Postal Code: 97205

Country: UNITED STATES OF AMERICA

Daytime Phone #: (503) 222-3613 Fax #: (503) 274-4622

Request and Payment Information

Description of Request and Payment Information: **Fee for Request for Continued Examination and and 3 months extension of time**

<u>Patent Fee</u>	<u>Patent Maintenance Fee</u>	<u>Trademark Fee</u>	<u>Other Fee</u>
<u>Application No.</u> 09/431,357	<u>Application No.</u>	<u>Serial No.</u>	<u>IDON Customer No.</u>
<u>Patent No.</u>	<u>Patent No.</u>	<u>Registration No.</u>	
<u>Attorney Docket No.</u> 2705-92		<u>Identify or Describe Mark</u>	

If the cardholder includes a credit card number on any form or document other than the Credit Card Payment Form, the United States Patent & Trademark Office will not be liable in the event that the credit card number becomes public knowledge.